

● PRINTER RUSH ●
(PTO ASSISTANCE)

Application: <u>10/763 064</u>	Examiner: <u>WINNER</u>	GAU: <u>3611</u>
From: <u>IF</u>	Location: <u>IDC</u> FMF FDC	Date: <u>5-12-05</u>

Tracking #: FPm-
10/76 3064 Week Date: 3-28-03

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>1-22-04</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: CLAIM 9 depends on claim
10.

THANK YOU

[XRUSH] RESPONSE: Enclosed is an examiner's airtt to
correct the issue of dependent claim 9.

INITIALS: W

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04